PTO/SS/06 (08-03)
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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875  Application or Doctor Mander 10 633 471											
CLAIMS AS FILED - PART 8 (Column 1) (Column 2)							SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
	FOR				IR EUTRA		RATE	FEE		RATE	FEE
BASIC FE	ž.					l		•	OR		
TOTAL CL	LAMS		micus 20 = 4				x s•	•	OR	x3•	
	DENT CLAIM	8	minus 3 ·			l	x s		OR	x s•	
MULTIPLE DEPENDENT CLAUM PRESENT (D7 CFR 1.1880)						+8•		OR	+9		
" If the dillerence in column 1 is less than zero, enter "9" in column 2.							TOTAL		OR	TOTAL	
CLARIS AS AMENDED - PART II											
1111						SMALLE	NITY	OR	OTHER SMALL		
4	·	(Column 1)  CLAMS  REMAINING  AFTER	·	HIGHEST HUMBER PREVIOUSLY	PRESENT EXTRA		. ŘATE	ADD)- TIONAL		RATE	ADDI- TIONAL FEE
[월 -	Total	AMERIOMENT	100-10	* 53	• • • •	ŀŀ	x,25.	FEE	OR	w.	
	OFR LINES	20.	Minus		•/	ł	x : /0D ·		OR.	×400	
I≅⊩	CFR 1.1808	_ک_			<u> </u>	1 }	180		OR	360	
FORST PRESENTATION OF MULTIPLE DEPONDENT CLAIM ST CFR 1.16(0)						jl	TOTAL			TOTAL	
6-28-06							ADO'L FEE		OR	ADD'L FEE	
	.,,,	(Column 1)		(Cohema 2)	(Cotumn 3)	٦.			1		
8		CLAIMS REMAINING AFTER		HIGHEST NUMBER PREVIOUSLY- PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL PEE	<i>j</i> .	RATE :	ADDI- TIONAL FEE -
ENDMENT	- Total	AMBIOMENT 50	Minus	- 53	. /	11	×8	1 . /	OR	x s	
	dependents COTE LINGS	• 5	Mine	- 6	•/	11	× 8=	-	GR	x t	./ .
FERST PRESENTATION OF MALTIPLE DEPENDENT CLAM (07 CHR 1.14(4))					1	+2 /		OR	+5	,	
							TOTAL ADD'L FEE		OR	ADD'L FEE	
(Column 1) (Column 2) (Column 3)											
58	13/06	CLAMS REMAINING AFTER		HIGHEST MUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TICINAL FEE
會	Total	AMEMONENT	Minus	53	1. /	1	x 8		7 ox	×8	
	dependent 7 GFR 1.460-8	· ~	Mires	- 6	1-/	1	× 8•		OR	xs=	
131		ATTORIOF MAI TON	£ 069690	BULCHAN CO.C.	FR .15(4)	1	+1 .		OR	• 8 •	
FRIST PRESENTATION OF MULTIPLE DEPENDENT CLASS (\$17 CPR \$.15(4))							TOTAL ADOL FEE		1 <sub>08</sub>	TOTAL ADD'L FEE	-
2 males 27 in column 3											
If the entry in column 1 is less train that only in column as train of the Polyhed Number Previously Paid For IN THIS SPACE is less than 20, enter "20".  If the "Right Number Previously Paid For IN THIS SPACE is less than 1, enter "3".  If the "Right st Number Previously Paid For IN THIS SPACE is less than 1, enter "2".  If the "Right st Number Previously Paid For IN THIS SPACE is less than 1, enter "20".											

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